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CHILDREN'S HOSPITAL MEDICAL CENTER
ENGINEERING OFFICE

annual report 1963 the children's hospital medical center

comprising

The Children's Hospital Medical Center

Association of the House of the Good Samaritan

Sarah Fuller Foundation for Little Deaf Children

The Sharon Sanatorium

The Hospital and Convalescent Home for Children

Children's Cancer Research Foundation, Inc.

Judge Baker Guidance Center

The Children's Mission to Children

the children's hospital medical center

300 Longwood Avenue, Boston, Massachusetts 02115

Telephone: 617-734-6000

Telephone: 617-482-6120

Executive Offices: 45 Milk Street, Boston, Massachusetts 02109

as of October 20, 1964

the children's hospital medical center

officers, board of trustees

William W. Wolbach, President
G. Peabody Gardner, Vice President
F. Murray Forbes, Jr., Treasurer
Arnold W. Hunnewell,
Secretary and Assistant Treasurer
Mrs. Kenneth W. Warren,
Chairman, Women's Committee
Nelson S. Bartlett, Jr., Assistant Treasurer
Miss Antoinette J. Valenza
Assistant Secretary

chiefs of staff

Charles F. Barlow MD, Neurologist-in-Chief
Sidney Farber MD, Pathologist-in-Chief
George E. Gardner MD, Psychiatrist-in-Chief
William T. Green MD,
Orthopedic Surgeon-in-Chief
Robert E. Gross MD, Surgeon-in-Chief
Charles A. Janeway MD, Physician-in-Chief
Donald D. Matson MD, Neurosurgeon-in-Chief
Edward B. D. Neuhauser MD,
Radiologist-in-Chief

counsel & auditors

William N. Swift, Counsel
Arthur Andersen & Co., Auditors

administrative staff

Leonard W. Cronkhite, Jr. MD
General Director

Lendon Snedeker MD
Assistant to the General Director

Muriel B. Vesey RN
Director of Nursing

Richard E. Held CPA, Director of Fiscal Affairs and Controller

Alexander T. Brown
Director of Personnel

Rudman J. Ham
Director of General Services

William J. Brennan
Director of Public Relations

Mrs. Anthony T. Michaels
Fund Director

Richard Bertocchi
John A. Lombardo
John J. Skinner
Administrative Assistants to the General Director

as of October 20, 1964

heads of major administrative and professional services

Admitting
Mrs. Mary Sullivan, Inpatient Registrar

Communications
Miss Josephine Daley, Chief Telephone Operator

Controller
Mrs. Laura Bocon, Manager, Patient Accounting
Mr. Benjamin Jurcik, C.P.A., Assistant Controller
Mr. Webster McKnight, Assistant Controller
Miss Margaret Meenan, Manager, Methods and Forms Control
Mr. Bernard Stillwell, Purchasing Agent

Dietary
Miss Maxine Gilson, Director

Employee Health
Miss Hester E. Macuen, RN, Director

Health Education
Mrs. Harriet H. Gibney, Director

Housekeeping
Mr. Laurence Levinson, Manager

Mail Room
Mr. Theodore Cranton, Supervisor

Maintenance
Mr. George Stilgoe, Plant Superintendent

Medical Records
Miss Ruth A. Hayward, Chief Medical Record Librarian

Patient Education and Recreation
Mrs. Barbara Patterson, Director

Pharmacy
Mr. Arthur Thompson, Chief

Physical Therapy
Miss Shirley Cogland, Director

Planning and Construction
Mr. Arthur Stomberg, Engineer

Print Shop
Mr. Salvatore Caliguri, Supervisor

Reception
Mrs. B. Paula Foley, Chief

Social Service
Miss Elizabeth Maginnis, Director

Special Services
Mr. George T. Nicoll, Manager

Surgical Appliance Shop
Mr. John Glancy, Manager

Visual Education
Mr. Ferdinand Harding, Director

Volunteer Service
Mrs. Kathleen Higgins, Director

Women's Committee
Mrs. Olga Cruz, Secretary

nursing

Faculty, School of Nursing

Miss Ethel Trafton
Associate Director

Miss Olive Simard, Chairman, Children's Hospital Program

Miss Rita Bryant
Chairman, Affiliate Program

Nursing Service Staff

Mrs. Phyllis G. Downing
Associate Director

Assistant Directors

Miss M. Aldra Dickie, Evening

Miss Lorene Dresser, Day

Mrs. Lois Morgan, In-Service Education

Miss Dorothy Pratt, Out-Patient

Miss Lydia Smith, Night

Supervisors and Instructors

Miss Louise Baraw, Nights

Miss Brooks Barnes, Medical

Miss Edith Bell, Central Services

Mrs. Grace Bennett, Supplies and Equipment

Mrs. Janice Christensen, Evenings

Miss Jeanne Colt, Surgical

Miss Olga Kinnal, Operating Room —Acting

Mrs. Caroline Overfors, Farley, Fifth Floor

Miss Priscilla Peabody, Orthopedic, Convalescent & Respirator Unit

Miss Barbara Sachs, Instructor

Mrs. Marion Stewart, Instructor

the president's letter

One characteristic of the President's Report over the past several years has been a necessary preoccupation with the organizational environment of the Hospital. This year, it is possible, and I might add pleasurable, to be able to depart from this theme. During 1963, the Hospital regained a large measure of its forward momentum and can take honest pride in a number of significant accomplishments.

Although no one area of advance should be singled out as most important, Trustees may be forgiven if fiscal integrity ranks high on their lists of collective concern. 1963 saw a healthy reduction in the Hospital's operating deficit with promise of more to come. The improvement in financial position can be attributed largely to increased utilization of the Medical Center's vast facilities, and to the application of proper controls and managerial skills.

The ability to show a considerable reduction in our deficit over the last two years is also the more significant when it is realized that during the same period we have taken a number of major steps to improve the compensation and collateral benefits to our interns, house staff and employees. Whereas two years ago the interns were receiving little more than room and board, they have now been brought up to levels comparable with other hospitals. Other classes of employees, who were receiving sub-standard wages by every measurement of scale, have been increased to a point where our starting rates of pay are consistent with those of many types of business. Finally, we are providing improved benefits in hospitalization, life insurance and pensions.

A second major front whereon obvious gains have been made relates to replacement, enlargement, consolidation, and modernization of the physical structures which make up the Hospital. Trustees, Administration, and Staff alike have worked diligently to formulate a total plan which will meet needs for the next several decades. Progress here has been at once rapid and orderly. As is pointed out in the General Director's Report, several new structures or areas have already been completed and are in use. Plans for others are in final stages while still others are under construction. New properties, each part of the overall development plan, have been acquired and are in operation. New con-

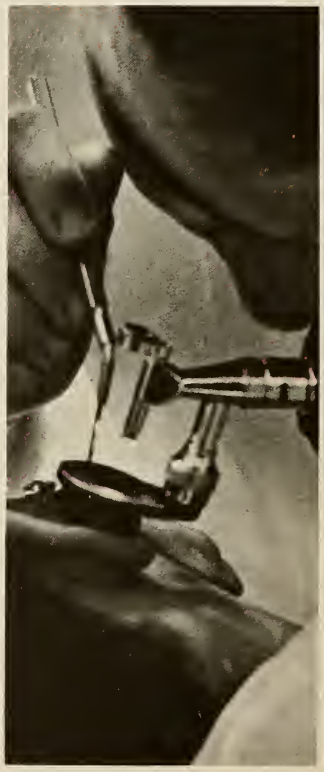
struction and acquisitions run the gamut from out-patient facilities and research laboratories, to housing and parking units. Such tangible evidence of progress and activity has been heartening to all members of the hospital community.

For a number of years, the Trustees have been unable to focus their attention on many aspects of the Medical Center's future development due to the overriding pressures of multiple fiscal crises, the press for new space, and administrative disorder. During late 1963, some of these long overdue deliberations took place as day-to-day operations proceeded in more orderly fashion. The Trustees joined with Administration and Professional Staff in an attempt to find solutions for three large areas of immediate concern.

First among these was the problem of providing, for that portion of the medical staff who wish to devote more nearly full time to the Hospital, a greater degree of financial stability as well as an expanded arena for their scientific and clinical development; second, to assure a full measure of institutional responsiveness to the needs of the medical community as they are made evident. These programs must consider such far-ranging topics as health insurance, government relations, and the type of services offered by the hospital. A third major study area was the development of a more meaningful relationship between Hospital and Medical School in their joint teaching and research activities. It would be premature to indicate that solutions for any one of these areas have been found, though any number of exciting possibilities are perceived.

William W. Wolbach
President

the children's hospital medical center treasurer's report



In 1963 the trend of increasing deficits, which had been in evidence since 1956 was reversed and a substantial reduction in the Hospital's operating loss was shown. For the year ended September 30, 1963, the loss before depreciation was $699,000 compared with $869,000 the year before, an encouraging drop of 20%. The decrease in the loss was the result of higher occupancy, greater utilization of hospital services, and increases in other income. Total occupancy for the year was 74.7%, compared to 72.7% in 1962. Although occupancy in the first quarter fell to a low of 66%, it rose in the remaining quarters to 76%, 79%, and 78%. Short-term occupancy in 1963, shown in the statistical summary, was 78.1% versus 73.3% last year. This increase in the short-term divisions, 5,245 patients days, 6.5%, not only offset the effect of the 21% decrease in the long-term divisions, but accounted for the increase in revenue from day rate services (without raising board rates) and for the increase in the special (ancillary) revenue. The establishment of accurate cost figures and improved controls has enabled the Controller to make accurate projections of operating expenses and revenues to form a sound base for planning by the General Director. During 1964 efforts will continue to be directed toward raising occupancy above the 80% level, which is required to meet current increases in salaries and the cost of free care.

F. Murray Forbes Jr.

F. Murray Forbes, Jr.
Treasurer

the children's hospital medical center

statement of income

for the years ended September 30, 1963 and 1962

	1963		1962	
During the year we billed patients for:				
Inpatient care	$ 2,971,445		$ 2,750,508	
Ancillary services	2,673,165		2,423,614	
Outpatient clinic fees	494,196		446,964	
Total patient revenue		$ 6,138,806		$ 5,621,086
We spent or incurred for:				
Patient care—salaries	$ 4,993,233		$ 4,583,887	
Patient care—expenses	2,880,898	$ 7,874,131	2,780,745	$ 7,364,632
Research and education—salaries and expenses	$ 2,422,831		$ 1,973,092	
Supported by grant income of	(2,422,831)		(1,973,092)	
Less revenue received for:				
General services, dietary, School of Nursing, etc.	$ 469,692		$ 443,218	
Overhead from grants	219,152	688,844	156,330	599,548
Net operating expenses		$ 7,185,287		$ 6,765,084
Resulting loss before free care and rate adjustments was		$(1,046,481)		$(1,143,998)
Because of contractual arrangements and patients' inability to pay, we issued:				
Rate adjustments to Blue Cross	$ 139,910		$ 159,284	
Rate adjustments to welfare agencies	220,618		213,678	
Allowances to patients	532,839		393,477	
Account write-offs, net	91,467	984,834	157,240	923,679
Since patient revenue did not equal expense and free care cost, operating loss was		$(2,031,315)		$(2,067,677)
This loss was partially defrayed by income from:				
Investments and trust funds	$ 869,666		$ 833,630	
Allotments from affiliates	198,481		188,121	
United Community Services	80,597		41,309	
Contributions for patient care	162,720		104,575	
Contribution: Committee of the Permanent Charity Fund	20,000		31,000	
Total other income		1,331,464		1,198,635
Loss before depreciation		$ (699,851)		$ (869,042)
Depreciation:				
Building	$ 295,086		$ 292,965	
Equipment	142,763	437,849	146,464	439,429
Net loss for the year charged to General Fund		$(1,137,700)		$(1,308,471)

The accompanying notes are an integral part of this statement.

the children's hospital medical center balance sheet

September 30, 1963 and 1962

ASSETS

	1963	1962
Current Assets:		
Cash	$ 663,292	$ 1,312,834
Accounts receivable—Patients, less allowances of $259,357 for doubtful accounts	1,663,850	1,507,955
Affiliated organizations	164,443	223,529
Other	154,718	143,353
	$ 1,983,011	$ 1,874,837
Inventories, at cost (first-in, first-out)	122,333	115,652
Prepaid insurance and expenses	35,305	43,876
Total current assets	$ 2,803,941	$ 3,347,199
Cash surrender value of life insurance and annuity policies	208,551	180,834
Investments, (Note 1)	19,686,917	18,734,161
Hospital property and equipment (Net) (Notes 2 and 4)	9,223,496	8,696,372
Construction in progress (Note 4)	353,948	173,269
	$32,276,853	$31,131,835

LIABILITIES AND CAPITAL FUNDS

Current Liabilities:		
Accounts payable	$ 220,171	$ 218,800
Accrued payrolls and other expenses	136,894	143,255
Total current liabilities	$ 357,065	$ 362,055
Mortgage notes payable (Note 4)	670,554	—
Reserve for pensions	207,538	179,912
Funds held for others	229,846	261,135
Fund balances:		
General	6,288,197	7,302,842
Special purpose	1,540,050	1,553,552
Endowment	10,200,623	9,768,001
Plant	9,223,496	8,696,372
New building construction (Note 3)	3,559,484	3,007,966
	$30,811,850	$30,328,733
	$32,276,853	$31,131,835

The accompanying notes are an integral part of this balance sheet.

ARTHUR ANDERSEN & CO.
294 WASHINGTON STREET
BOSTON, MASSACHUSETTS 02108

To the Board of Trustees,
The Children's Hospital Medical Center:

We have examined the balance sheet of THE CHILDREN'S HOSPITAL MEDICAL CENTER (a Massachusetts corporation) as of September 30, 1963, and the related statements of income and fund balances for the year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the accompanying balance sheet and statements of income and fund balances present fairly the financial position of The Children's Hospital Medical Center as of September 30, 1963, and the results of its operations for the year then ended, in conformity with generally accepted accounting principles applied on a basis consistent with that of the preceding year

Arthur Andersen & Co.

Boston, Massachusetts,
December 6, 1963.

statement of fund balances for the year ended September 30, 1963

Balance at September 30, 1962	$30,328,733
Net loss for the year, from statement of income	(1,137,700)
Payment to an affiliate for prior years' use of research and other facilities	(107,135)
Gains on sales of securities	413,192
Net contributions, gifts, bequests and restricted endowment fund income	1,193,843
Outside grants for special purposes	2,521,801
Expenditures for research and education	(2,422,831)
Miscellaneous (net)	21,947
Balance at September 30, 1963	$30,811,850

The accompanying notes are an integral part of this statement.

the children's hospital medical center

notes to financial statements september 30, 1963

(1) Investments are stated at cost or, if received by gift or bequest at fair market value when acquired. Market value of investments at September 30, 1963, was $27,363,000.

(2) Hospital property and equipment is stated at cost. A summary of the changes in property and equipment accounts for the year ended September 30, 1963, and balances of allowances for depreciation are set forth below:

	Year Ended September 30, 1963		
	Beginning Balance	Net Additions	Ending Balance
Property and equipment —			
Land	$ 444,114	$ 60,300	$ 504,414
Buildings	11,202,760	731,321	11,934,081
Equipment	2,095,093	171,953	2,267,046
	$13,741,967	$963,574	$14,705,541
Allowances for depreciation	5,045,595	436,450	5,482,045
	$ 8,696,372	$527,124	$ 9,223,496

(3) The net balance of the new building construction fund of $3,559,484 represents funds designated for the construction of a clinic and research building. At September 30, 1963, the Center had entered into a contract for the construction of the initial stages of this building at an estimated cost of approximately $1,800,000.

(4) The Center has under construction a parking facility for an estimated cost of $1,100,000. In connection with this construction, the Center entered into an agreement with a bank providing for an $825,000 first mortgage loan, payable within 20 years, with interest at 6% for one year and 5¼% for all subsequent years. Principal advances of $228,780 had been made by the bank to the Center for work completed through September 30, 1963. The remainder of the cost of construction of this facility will be financed by a 6½% second mortgage loan in the amount of $300,000.

During the year ended September 30, 1963, the Center acquired real estate at a cost of $450,000. Funds for the purchase price were provided by a 5½%, $315,000 first mortgage loan payable in monthly installments over a 20 year period and a 6½%, $135,000 second mortgage loan payable within 5 years.

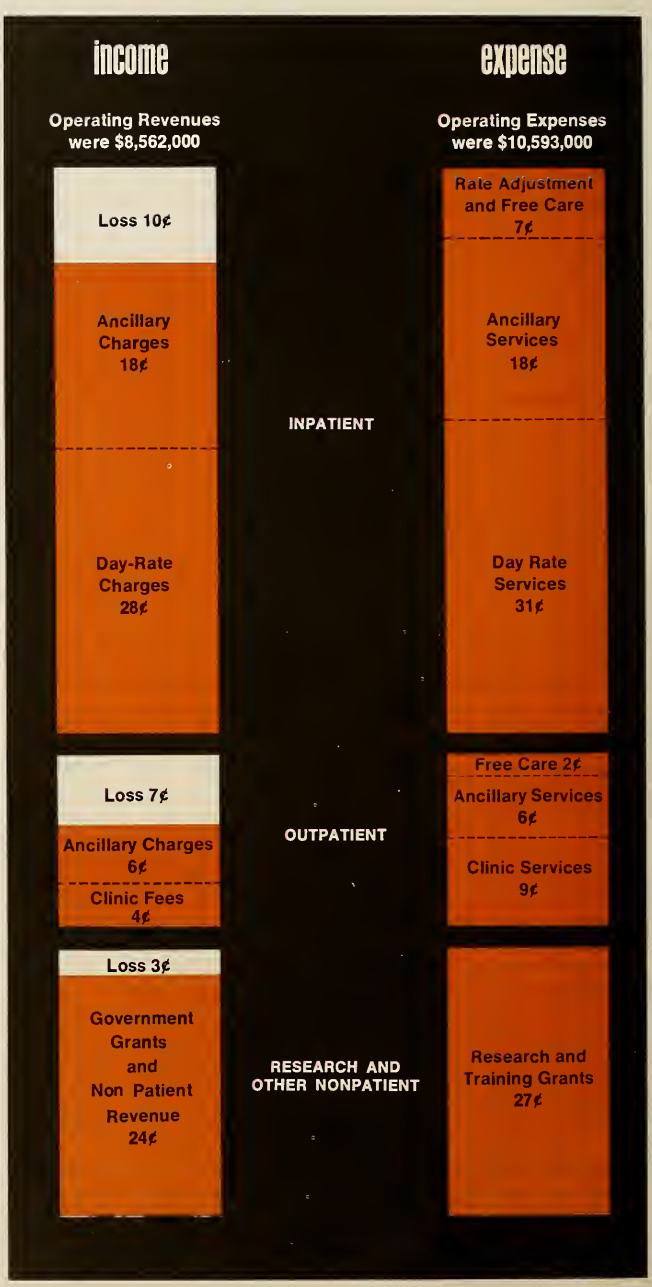
(5) The accompanying statement of income for The Children's Hospital Medical Center includes the revenue and expenses incurred in providing patient care functions for affiliated organizations — Association of the House of the Good Samaritan, Sharon Sanatorium and The Hospital and Convalescent Home for Children.

Under the provisions of agreements with the affiliates the Medical Center receives, for these services, all revenues from patients plus allotments of income which the affiliates receive from their investments or from other sources. Such allotments amounted to $198,481 for the year ended September 30, 1963.

the children's hospital medical center fiscal year 1963

Financial Operations Summary

In the fiscal year 1963, it cost The Children's Hospital Medical Center $2,031,000 more to operate the Hospital than it received from patients, insurance companies and Blue Cross, welfare agencies, and research grants. This operating loss was partially defrayed by income from investments and allotments of $1,068,000, United Community Service contribution of $81,000, and other contributions for patient care of $183,000. Since these sources of other income totaled only $1,332,000, it was therefore necessary to allocate $699,000 from the endowment fund principal contributed to the hospital in prior years.



Joel J. Alpert MD, Chief of Child Health Division, Associate in Surgery

Charles Barlow MD, Neurologist-in-Chief

William Berenberg MD, Chief of Infants' and Children's Medical Division, Senior Associate in Medicine

Thomas E. Cone, Jr. MD, Chief of Medical Out-Patient Department, Senior Associate in Medicine

the children's hospital medical center

Statistical Summary — Comparative Fiscal Years 1963 & 1962

patients

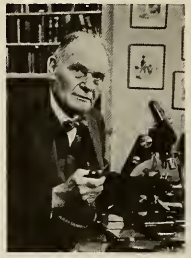
INPATIENT	Admissions		Patient Days		Average Length of Hospitalization (Number of Days)		Per Cent of Beds Occupied	
	1963	1962	1963	1962	1963	1962	1963	1962
Short-term divisions (300 beds)	10,737	9,451	85,550	80,305	7.2	7.5	78.1	73.3
Long-term divisions (50 beds)	171	172	9,886	12,535	30.3	37.3	54.2	68.6
Total Hospital (350 beds)	10,908	9,623	95,436	92,840	8.7	9.6	74.7	72.7

OUTPATIENT	1963	1962
Clinic Visits	118,414	113,104

special services

	1963	1962
Laboratory tests	166,936	156,100
Operations	6,044	5,513
Electrocardiology treatments	4,563	3,526
X-rays	91,346	86,400
X-ray therapy treatments	4,118	3,049
Physical therapy treatments	26,908	28,997

Louis K. Diamond MD, Hematologist, Associate Physician-in-Chief



John Enders, PhD, Chief of Research
Division of Infectious Diseases

Leonard W. Cronkhite, Jr. MD, General Director

director's report

In 1962, the Hospital announced development plans to mark its entry into a second century of existence. Hundreds of hours of study and analysis were expended to formulate a plan which might assure for the institution a future in American Medicine as distinguished as its past. The year 1963 may well be remembered as that period when the transition from analysis to action took place. Almost all of the nearly 2,000 hospital staff members became immersed in a period of intense activity and effort. Happily, at year's end, many intermediate objectives were reached and success far outweighed failure. Even more important, came a clearer perception of the goals to be achieved and the means of their attainment. Thus, we review the year heartened and confident.

Fiscal Affairs

Since the upward trend of the Hospital's deficit posed the largest single threat to its continued prosperity, fiscal affairs necessarily demanded the larger share of concern. In 1962, the Hospital's deficit had reached an all-time high of $869,000 before depreciation. For the year ending September 30, 1963, as the Treasurer's Report shows, the figure was reduced to $699,000. This reduction, approximately 20% of the total, represents almost exactly that amount programmed.

Had the Trustees chosen to insist on a program of austerity only, this figure might easily have reached a more spectacular 40%. Fortunately, the Trustees fully supported the alternative of selective spending with the view toward building a more secure future. This decision, however difficult to reach, has been the keystone upon which the Director and the Professional Staff have formulated the future medical developments which are to follow.

Government Relations

One of the most significant occurrences during 1963 was the Hospital's participation in a series of public or quasi-public hearings on hospital costs. These resulted from the appointment of a special legislative commission to investigate the rising cost of hospital operations with the consequent increase in charges to patients. As might be expected, the sessions were often marked by acrimony and bad temper; but if one can put aside these seemingly inevitable by-products of public hearings, it is quite clear that a few fundamental issues were brought openly into public view.

On the one hand, government at all levels has become a substantial purchaser of medical care. As such, it has a perfect right to ascertain whether or not the costs for such care are reasonable and appropriate.

Further, it has the obligation to see to it that appropriate care is easily available to all those for whom it is responsible. Its voice is one of many to be heard in the planning of medical facilities, both public and private.

On the other hand, the private hospitals which render care to government-sponsored patients have an equal right to expect full reimbursement for providing such care. They cannot with the limited resources at hand subsidize a portion of governmental obligation, nor can they be expected to devise better means of caring for the sick if they are tightly regulated from the purely fiscal standpoint.

These basic issues, seemingly in conflict, can be translated into incontrovertible facts and numbers, if the proper forum for arbitration can be created. Our own policy will be to continue efforts to resolve the issues with due regard for the rights for all parties.

Personnel Policies

Employees of hospitals have enjoyed very few of the benefits which have fallen to labor in general. Both salaries and "fringe benefits" have too often been reflections of work conditions of a decade past. Studies completed at Children's Hospital Medical Center in 1962 showed that the reimbursement level for our staff was well below all other comparable industrial levels in the area. The number of older employees was increasing and the Hospital was unable to attract able young people into the health fields. The reason was obvious in that personnel policies were totally unrealistic, and there remained little financial inducement for candidates, however well-motivated they might otherwise be.

As a consequence of the studies made in 1962, the Hospital embarked on a program of personnel policy revision of substantial magnitude. First, a salary administration program was instituted in 1963 in which all of the many hundreds of hospital jobs were classified and described in detail. For each level and classification, a salary range more nearly comparable to that of other industries was established. Second, the Hosptial provided to the employee health insurance benefits which, though modest at the present time, will be increased as our financial condition improves. Third, the Hospital provided for the employee a modest life insurance policy at no cost; and lastly, in 1964, it is contemplated that a retirement plan will be formulated which will guarantee to the employee a retirement income approximating that which he might expect had he worked for another employer.

Development Program

The most obvious of 1963's activities were the numerous construction crews whose presence required skillful planning to avoid interference with the care of patients. Early in the year, a new cafeteria, and additions to kitchen and coffee shop were completed. This was followed by the demolition of an ancient laundry building and erection of a temporary structure for shipping and receiving.

The largest single project for the year was construction of a multi-level parking structure which at this writing is in full operation. Here the Hospital's architects responded in full measure. The building not only performs all of those functions for which it was planned but, moreover, has provided a strikingly handsome addition to the entire area.

Acquisition of new properties kept pace with construction. A doctors' office building on Brookline Avenue, additional housing, and certain land transfers have each contributed their part to the over-all scheme. In last year's report, these many activities were described as the staging phase of the development program. Nearly all of these preliminary moves have been completed so that the way has been cleared for the more critical and central buildings which are to follow.

The Professional Staff

Progress can be measured in many ways. To the casual visitor, new buildings and facilities signify progress, while the businessman sees progress as good management, and sound fiscal policy.

To the hospital employee, tangible appreciation for his contribution to the institution is progress; the government auditor applauds orderliness and fiscal honesty; but for the sick child and his equally sick at heart parents, progress is measured only by the success or failure of the professional staff in meeting the intensely personal threat to continued well being posed by disease.

In 1963, the physicians and scientists who constitute CHMC's professional staff took inventory of themselves. The list revealed an extraordinary array of accomplishments, interests, and aspirations. It also revealed some areas where further growth and development are necessary, or where better balanced opportunities among clinician, clinical investigator, and basic scientist can be achieved. Most heartening was the fact that an appraisal was made and a plan developed. For this reason, this brief interim report for 1963 is dedicated to the professional staff. These men are the foundation of excellence without which the future cannot be built.

Leonard W. Cronkhite, Jr., M.D.
General Director

source of children's hospital patients BY PLACE OF RESIDENCE *For the year ended September 30, 1963*

massachusetts — 22,841

boston — 9,951

elsewhere in massachusetts

Barnstable County	113	Hampshire County	107
Berkshire County	131	Middlesex County	5,453
Bristol County	647	Nantucket County	10
Dukes County	2	Norfolk County	2,652
Essex County	1,220	Plymouth County	932
Franklin County	50	Suffolk County	724
Hampden County	317	Worcester County	532

elsewhere in the united states — 2,085

Alabama	10	Montana	4
Arizona	2	New Hampshire	399
Arkansas	1	New Jersey	59
California	16	New Mexico	1
Colorado	1	New York	224
Connecticut	341	North Carolina	2
Delaware	2	North Dakota	2
District of Columbia	3	Ohio	20
Florida	32	Pennsylvania	30
Georgia	9	Puerto Rico	1
Idaho	1	Rhode Island	406
Illinois	8	South Carolina	2
Indiana	3	Tennessee	3
Kansas	6	Texas	7
Kentucky	7	Utah	1
Louisiana	4	Vermont	111
Maine	314	Virginia	19
Maryland	10	Washington	1
Michigan	11	West Virginia	3
Missouri	4	Wisconsin	5

elsewhere in the world — 148

grand total — 25,074

changes

John A. Lombardo was appointed Administrative Assistant to the General Director, December 17, 1962

Mrs. Ruth A. O'Brien retired as Chief Telephone Operator after 34 years, January 20, 1963

William J. Brennan was appointed Director of Public Relations and Assistant Director of the Hospital, February 1, 1963

Mrs. Harriet H. Gibney was appointed Director of Health Education, February 1, 1963

Mrs. Corrine Norton was appointed Chief Medical Record Librarian, April 1, 1963

Dr. R. Cannon Eley resigned as Director of Postgraduate Medical Education to become Professor of Pediatrics and Chief of Pediatrics at the Roger Williams Hospital, Brown University, June 1, 1963

Richard Bertocchi was appointed Administrative Assistant to the General Director, June 10, 1963

Dr. Charles F. Barlow was appointed Neurologist-in-Chief, July 1, 1963

Captain Thomas E. Cone, Jr., was appointed Director of Ambulatory Services and Associate Physician in the Adolescents' Unit, September 1, 1963

Mrs. David Wilder, Chairman of the Women's Committee, completed a two-year term of office in that position, November 12, 1963

Mrs. Kenneth W. Warren was elected Chairman of the Women's Committee, November 12, 1963

Mrs. Corrine Norton, Chief Medical Record Librarian, resigned January 12, 1964

Dr. Dean Crocker, Associate in Anesthesiology, became Director of the newly-formed Respiratory Therapy Unit, March 2, 1964

Dr. Charles D. Cook, Chief of the Medical Out-Patient Department since 1954, resigned to become Professor and Chairman of the Department of Pediatrics at Yale School of Medicine and Pediatrician-in-Chief of Grace New Haven Hospital, April 1, 1964

Dr. Thomas E. Cone, Jr., Director of Ambulatory Services and Associate Physician in the Adolescents' Unit, was appointed Chief of the Medical Out-Patient Department, April 1, 1964

Miss Ruth A. Haywood was appointed Chief Medical Record Librarian, June 1, 1964

Mrs. Grace Bradley, CHMC's Chief Receptionist for 12 years, retired June 26, 1964

Mrs. B. Paula Foley became Chief Receptionist, June 26, 1964

Dr. Robert J. Haggerty, Chief of CHMC's Child Health Division since 1956, resigned to become Professor and Chairman of the Department of Pediatrics at the University of Rochester's School of Medicine and Dentistry, July 1, 1964

Dr. Joel J. Alpert, former Assistant in Medicine, was appointed Chief of the Child Health Division, July 1, 1964

Dr. Franc D. Ingraham, Neurosurgeon-in-Chief, retired from CHMC after 35 years, July 1, 1964

Dr. Donald D. Matson, former Acting Neurosurgeon-in-Chief was appointed Neurosurgeon-in-Chief, July 1, 1964

Miss Elizabeth Fitzgerald, Purchasing Agent, retired from CHMC after 50 years of service, September 1, 1964

Bernard S. Stillwell became Purchasing Agent, September 1, 1964

John J. Skinner was appointed Administrative Assistant to the General Director, September 8, 1964

Mrs. Mary W. Sullivan was appointed Inpatient Registrar, September 8, 1964

in memoriam

Dr. Enrique Galan, Research Associate in Medicine, died May 21, 1963

Dr. Claude M. Fuess, a member of the Board of Trustees, died September 10, 1963

Dr. Leonid S. Snegireff, Senior Associate in Medicine, The Children's Cancer Research Foundation, died September 5, 1963

Dr. Robert T. Moulton, Associate in Medicine, died November 21, 1963

John F. Kennedy, President of the United States, and a member of the Board of Trustees, died November 22, 1963

Dr. Horace K. Boutwell, formerly associated with Children's Hospital, died January 3, 1964

Dr. William F. Cotting, former Visiting Surgeon at CHMC, died January 10, 1964

Mrs. Homer B. Richardson, a member of the Corporation, died February 25, 1964

Burt F. Moody, a member of the Corporation, died April 28, 1964

Dr. S. Forrest Martin, Associate in Ophthalmology, died June 15, 1964

Miss Emily Rockett, a member of the Corporation, died June 17, 1964

Dr. James W. Sever, Orthopedic Surgeon, emeritus, died July 19, 1964

1962 - 1963

Mrs. David Wilder	Chairman
Mrs. Albert Pratt	Vice-Chairmen
Mrs. Kenneth W. Warren	
Mrs. Richard C. Knight	Recording Secretary
Mrs. Randolph K. Byers	Corresponding Secretary
Mrs. T. C. Haffenreffer, Jr.	Treasurer

Executive Committee

Rotating members for three years:
Mrs. Howard F. Gillette **Mrs. Oldfield B. B. Rapalyea**
Mrs. Phillip C. Thibodeau

For two years, to fill an unexpired term
Mrs. Stephen Little

Executive Committee

Rotating members for two years:
Mrs. Charles F. Batchelder **Mrs. Hans J. Kroto**

For one year:
Mrs. Weston W. Adams **Mrs. Jacob Wallace**
Mrs. Frederick R. Weed

Members ex officio:

Mrs. Charles F. Hovey	Past Chairman
Mrs. Charles A. Janeway	Staff Wives
Mrs. Robert B. Almy	Volunteer Service
Mrs. Robert H. Hopkins	Nominating Committee

1963 - 1964

Mrs. Kenneth W. Warren	Chairman
Mrs. T. C. Haffenreffer, Jr.	Vice-Chairmen
Mrs. Phillip C. Thibodeau	
Mrs. Stephen Little	Recording Secretary
Mrs. Frederick R. Weed	Corresponding Secretary
Mrs. Howard F. Gillette	Treasurer

Executive Committee

Rotating members for three years:
Mrs. John M. Alden **Mrs. Charles W. Bartlett**
Mrs. Alexander S. Nadas

For two years:
Mrs. Oldfield B. B. Rapalyea

For one year:
Mrs. Charles F. Batchelder **Mrs. Hans J. Kroto**

For two years, to fill unexpired terms:
Mrs. H. Bourne Pillsbury **Miss Agnes Wheeler**

For one year, to fill an unexpired term:
Mrs. George Sturgis

Members of the Executive Committee:

Mrs. David Wilder	Past Chairman
Mrs. Charles F. Hovey	Friends of CHMC
Mrs. David Wilder	Nominating Committee
Mrs. Charles A. Janeway	Staff Wives
Mrs. Roger A. Perry	Volunteer Service

women's committee

chairman's report

For the year ended September 30, 1963

A year ago the Women's Committee reported the beginnings of an extensive program of change and readjustment within its organization and activities. We asked ourselves: what were we helping The Children's Hospital Medical Center to accomplish? Were we really understanding and assisting its needs and its goals? We analyzed our weaknesses and our strengths, hopefully rearranging our organization and activities to be more effective and productive. We were also aware that any changes would take several years to materialize.

It is difficult to evaluate the actual results. How does one measure the scope of good-will, of service? How can one judge whether the intangible changes have paid off — particularly during a year's time? Perhaps the financial fruits are easier to record. Although fund raising is not our primary aim we do intend through good management, not high prices, to utilize our various money-making services. These past twelve months reveal that we have more than doubled our votable funds — from roughly $15,500 to $32,000. In addition to the successful efforts of the Lunch, Gift, Thrift Shops and the Yankee Bookstall, we are also deeply grateful to the community activities of the Cataumet Hospital Project, $1,550; the Dedham Skating Party, $180; the Cohasset Tennis Benefit, $830; and particularly the extraordinary efforts of the teen-age Daffodil Fair, which turned in $4,000!

It has been the policy of the Women's Committee to underwrite new programs which our director believes are important to the welfare of our patients. These projects are not covered by the hospital general funds and therefore need the financial boost of an outside source. Recently we helped to establish the Department of Education and Recreation. Now, in addition, we are supporting a new Nurses Training Program at Northeastern University — which should ultimately alleviate the hospital's nursing shortage by providing more nursing students with a better education at a lower cost. This latter is made possible by Northeastern's well-established cooperative program which provides alternating periods of instruction and work.

A number of special events have been of great interest. Dr. R. Cannon Eley directed a Seminar for Pediatricians from various parts of the United States. Women's Committee members served coffee each morning and acted as hostesses. At our annual Volunteer Evening, pins and certificates were awarded for hours and years of dedicated volunteer service. Dr. Louis K. Diamond, Associate Physician-in-Chief, spoke about "Pediatric Malnutrition Here and Abroad", supplementing his interesting talk with colored slides.

At the CHMC Bowling Banquet, the Women's Committee trophy was presented to the winning team: the Housekeeping Dept. The Employees Service Awards took place on May 15. Following the recognition of years of service, a tea was sponsored by our committee. The Teen-Age Volunteer Party included both fathers and mothers of our junior volunteers. Mrs. Kenneth W. Warren represented our committee at the Nurses Graduation — always a very stirring ceremony. Our first International Tea took place on October 16. The Staff Wives group, sensing a tremendous need to welcome our foreign physicians and nurses, initiated the original plan, endorsed by Dr. Leonard W. Cronkhite, Jr. and supported by the Women's Committee. For each foreign doctor or nurse the corresponding Consul was invited — resulting in a festive and friendly occasion. On October 23, the Noami Group No. 11, which contributes so generously each year to Dr. William T. Green's Orthopedic Department, was welcomed by our committee at a tea following a lecture and tour.

Inside the hospital our hospitality services continued. Again this year we contributed to a fund for tickets to Symphony, Pops and theatrical events for the student nurses. Their enthusiastic notes acknowledged appreciation. Throughout the year, on holidays and special occasions flowers are provided by our committee for the Chapel, Teas and the Nurses Graduation.

Outside the hospital, we attended the various national, regional and state hospital association meetings, which are designed to increase our knowledge and give us a broader scope of the hospital and health field. The Spring meeting of the Greater Boston Region of the M.H.A. took place at CHMC — Dr. Louis K. Diamond was the speaker. This year's A.H.A. convention took your chairman to New York for four days of interesting and instructive sessions.

Our monthly meetings have been accented by excellent speakers — who have generously given their time to keep us informed about our hospital. This year's topics included an analysis of The Children's Hospital Medical Center programs and problems, the functions of the Children's Mission to Children, the Nursing Service, approaches in psychiatry, infectious diseases in underdeveloped countries and the Measles Vaccine. It was a pleasure to have had the May picnic meeting at my home. Mrs. Worthing L. West, member of the A.H.A. Council on Hospital Auxiliaries, stressed the importance of volunteers acquiring as much knowledge and understanding of their hospitals as possible.

The Women's Committee is a venerable organization — composed of devoted chairmen and committee members, several of whom have served this hospital for more than 40 years! The conscientious efforts, the patience and dedication of this group — have made my position as chairman a pleasure, a privilege and a rewarding experience. My heartfelt thanks to all —also to Mrs. Jose R. Cruz, our particularly talented and capable Executive Secretary. Such a committee — with the splendid spirit of giving — will, I am certain, continue to support The Children's Hospital Medical Center's responsibility of better care for all children.

Respectfully submitted,

Nancy N. Wilder

Mrs. David Wilder
Chairman, Women's Committee

the children's hospital medical center women's committee 1962-1963

financial summary

fiscal year 1963

Mrs. Stewart H. Clifford, Chairman

Cash on Deposit, September 30, 1962	$17,484	
Transactions (Per Summary of Cash Reports for Fiscal Year Ending September 30, 1963:		
Add: Receipts	40,679	
	58,163	
Less: Disbursements	22,935	
Cash on Deposit, September 30, 1963		$35,228
Less: Cash Balance required for Monthly Expenses		3,000
Available Funds to be voted for 1963 - 1964		$32,228

DISTRIBUTION OF FUNDS 1963 - 1964

COMMITTED:

Yankee Bookstall proceeds to Building Fund	$ 6,035
Daffodil Fair proceeds to Dept. of Education & Recreation	4,000
Cohasset Tennis Tournament proceeds to Nurses Loan Fund	830
	$10,865

COMMITTEE OPERATION EXPENSE ITEMS:

Camera Fund (Donated 1963 - 1964)		
Teas & Entertainment	$ 1,500	
Staff Wives	1,100	
Flower Fund	450	
Discretionary Fund	300	
Library Committee	250	
Hospital Service Awards Ceremony	125	
Holiday Committee	100	
Knitting Committee	100	
Picture Fund	25	
Periodicals (Doctor's Lounge)	25	
		$ 3,975

CONTRIBUTION ITEMS:

Northeastern University Project	$10,000	
Dept. of Education & Recreation	4,000	
Scholarships for Nurses	1,500	
E.C.G. Emergency Dept.	658	
Social Service	500	
Tickets for Nurses	375	
Housekeeping Dept. (Portable Chairs)	250	
Dept. of Recreation, Intercom. for Isolation	80	
Bowling Prize	25	
		$17,388
November 12, 1963 Votable Funds		$32,228

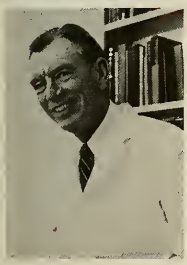
Sidney Farber MD, Pathologist-in-Chief, Chairman, Division of Laboratories & Research

Carlyle G. Flake MD, Otolaryngologist-in-Chief

committee chairman

Mrs. Kenneth W. Warren Christmas Card Committee **Mrs. George H. Sweetnam** Christmas Window Painting **Mrs. Kirke A. Neal** Decoration Committee **Mrs. H. Raymond Wilkinson** Gift Shop **Mrs. George A. Clapp** Girl Scouts Committee **Mrs. Stephen Little** Holiday Committee **Mrs. Sidney H. Wirt** Hospitality Coffees **Mrs. Sherman R. Thayer** Hospitality for Foreign Nurses **Mrs. Francis A. Harding** Knitting Committee **Mrs. Kenneth W. Warren** Library Committee **Mrs. Samuel S. Stevens** Lunch Shop **Mrs. Robert H. Hopkins** Nominating Committee **Mrs. Edgar A. Bering** Nurses' Teas **Mrs. Albert A. Hittel** Photography **Mrs. Charles F. Hovey** Picture Committee **Mrs. Robert M. P. Kennard** Publicity **Mrs. Charles A. Janeway** Staff Wives Committee **Mrs. Joel M. Barnes** Surgical Dressings Committee **Mrs. O. B. B. Rapalyea and Mrs. Albert Pratt** Thrift Shop **Mrs. Robert B. Almy** Volunteer Services Committee **Mrs. Frederick R. Weed** Yankee Bookstall

J. Roswell Gallagher MD, Chief of Adolescents' Unit, Senior Associate in Medicine



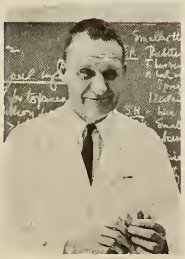
George E. Gardner MD, Psychiatrist-in-Chief

William T. Green MD, Orthopedic Surgeon-in-Chief

Robert E. Gross MD, Surgeon-in-Chief

Trygve Gunderson MD, Ophthalmologist-in-Chief

Franc D. Ingraham MD, Neurosurgeon-in-Chief, Emeritus



Charles A. Janeway MD, Physician-in-Chief, Chief of Good Samaritan Division

Samuel L. Katz MD, Chief of Newborn Division, Senior Associate in Medicine

as of October 20, 1964

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Adolescents' Unit
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Miriam D. Manning MD (Tumor Therapy)
Norman I. Gold PhD
Ezio Merler PhD
Hans B. Nevinny MD (Tumor Therapy)

Visiting Lecturer in Medicine
William B. MacDonald MD (from 9/1/64)

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John A. Spargo MD

Research Associate
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Warren R. Guild MD
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Simeon Locke MD (Neurology)
W. Warren Point MD
Herbert Selenkow MD

Consulting Ophthalmologist
Albert E. Sloane MD

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Somers H. Sturgis MD

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Isabelle Valadian MD

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Consulting Obstetrician
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Research Associates
John Kosa PhD

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Lawrence S. Morse MD
Harold J. Wheeler MD

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R. Grier Monroe MD

Associate in Cardiology
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Walter T. Goodale MD
A. A. Sasahara MD
Jacob Wallace MD
Richard Wolff MD
Alla G. Zaver MD

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Gabor Czoniczer MD
Allen L. Friedlich MD
Sprague W. Hazard MD
Benedict F. Massell MD
Alexander S. Nadas MD
Marian W. Ropes MD
David D. Rutstein MD
George P. Sturgis MD
Raymond Walther MD
Edwin O. Wheeler MD

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Benedict F. Massell MD

Research Associates
Gabor Czoniczer MD
J. Gabriel Michael PhD
Research Assistant
Thomas Michael AM, MS

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Louis K. Diamond MD
Associate in Hematology
Park S. Gerald MD
Assistants in Hematology
Sherwin V. Kevy MD
Herbert S. Strauss MD

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Dean Crocker MD
John B. Stetson MD
Assistant in Anesthesiology
Carol H. Johnson DDS

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Melvin I. Cohen DMD
Lennard T. Swanson DMD
Associate in Pedodontics
Robert F. Watton DMD
Assistants in Pedodontics
Harry K. Bailey DMD
Norman T. Budde DMD
John D. Doykos, III DMD
Owen W. Kite DMD
Eugen Albert Petersen DMD
Raymond F. Widican DDS
Assistant in Pedodontics (Oral Biology Research)
Edward A. Sweeney DMD
Associate in Oral Surgery
Walter C. Guralnick DMD
Associate in Orthodontics
Edward I. Silver DMD
Assistants in Orthodontics
Henry C. Beebe DDS
Emory Farrington DMD
Abijah Pierce DMD

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Cesare T. Lombroso MD
Donald H. Osterberg MD
H. Richard Tyler MD
Assistants in Neurology
Stuart B. Brown MD
Jordan Joseph MD
Research Assistant
Anthony Lorenzo PhD
Consulting Neurologist
Randolph K. Byers MD

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John Shillito, Jr. MD
Associates in Neurosurgery
Joseph H. Galicich, Jr. MD
Francis X. Rockett MD

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Sumner D. Liebman MD
Assistants in Ophthalmology
Arthur Boruchoff MD
Arthur F. Calnan MD
Alfred W. Scott MD

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Senior Associates in Orthopedic Surgery
Henry H. Banks MD
Jonathan Cohen MD
Paul W. Hugenberger MD
Arthur W. Trott MD
Associates in Orthopedic Surgery
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Research Assistant
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John C. Trakas MD
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Speech Pathologist
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Lydia Dawes MD
Henry Wermer MD
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Abraham Fineman MD
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Donald Russell MD
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Dexter Bullard MD (Division of Child Health)
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Richard Galdston MD
Marvin B. Krims MD
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Alan Prager MD
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William Calmas MA
Haskel Cohen PhD
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William Fitzgerald PhD (Cerebral Palsy)
Harold Goodglass PhD (Seizure Unit)
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